# To be returned before October 5th, 2025

**Application Form**

The admissibility of the application will be evaluated based on information given on the application form and provided by the applicant. Incomplete applications will not be considered nor returned.

So please fill precisely the set of elements presented below.

**1- CONTACT INFORMATION**

**Principal Applicant**

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| Name:  |
| Title/Rank:  |
| Department:  |
| University/Institution:  |
| Mailing Address (building, street, city, postal code):  |
| Phone:  | Fax:  | Email:  |

**Applicant’s Department Head/Principal investigator**

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| --- |
| Name:  |
| Title/Rank:  |
| Department:  |
| University/Institution:  |
| Mailing Address (building, street, city, postal code):  |
| Phone:  | Fax:  | Email:  |

**Members of the team dedicated to the project (copy as necessary to list all members)**

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| Name:  |
| Title/Rank:  |
| Department:  |
| University/Institution:  |
| Phone:  | Fax:  | Email:  |

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| Department:  |
| University/Institution:  |
| Phone:  | Fax:  | Email:  |

1. **PROJECT**

**Project title**

**Abstract**

**Research project (including references)**

**Future research and perspectives, must include future application to human health**

**Main publications in peer reviewed journal (limited to 10 most relevant publications)**

**Abstract for the general public (maximum 300 words)**

**Research and Academic Qualifications of Applicants:**

Please, attach the C.V. of the principal applicant.

**Application submission Instructions**

The complete application must be assembled as a single document and sent electronically to: mviltard@fondationphysiologie.org by **midnight October 5th,2025.**